

**Physician Review of  
the Strategy and Action Plan for the  
Development of Nursing and Midwifery in Iraq**

**Iraq Ministry of Health**

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A group of eleven physicians were invited to review “The Strategy and Action Plan for the Development of Nursing and Midwifery in Iraq.” Each physician was asked to read the plan and consider these questions:

1. Is this plan feasible and realistic?
2. Will this plan be effective in building a strong cadre of nurses for Iraq?
3. Do you foresee any constraints to implementing this plan?

Five physicians attended the physician meeting to discuss the plan on March 13, and three other physicians sent their written comments on the plan.

The physicians enthusiastically and unanimously supported the plan. They considered the plan both feasible and realistic, as well as effective in building a strong nursing workforce. Dr. Naira said that the strategic plan has captured every aspect. Dr. Rafa suggested that the strategic plan should be transformed into action. The physicians wanted action, programs to change nursing rather than more meetings or plans.

In terms of constraints to implementing the plan, most of the physicians focused on the large number of committees without any coordination. Dr. Batool suggested that too many committees can kill a program. Dr. Neima thought that there should be one steering committee with all the stakeholders to coordinate the other committees. Other constraints included the limited capacity of the current Iraqi nursing workforce to implement such an ambitious plan.

The physicians particularly focused on the image and status of nursing in Iraq. Dr. Rafa said that the constraints start with changing the image of nursing. Dr. Ameir noted that the image must change at every level, and respect is needed immediately to recruit good candidates for nursing. Dr. Ameir is changing all the nursing badges at Medical City to eliminate the designation “sub-staff,” which he considers demeaning. Dr. Neima thought that the Iraqi Society of Sociologists (ISS) and Al Hawza should be actively involved in studying and planning a campaign to change the image of nursing, since this is a social problem. Dr. Ameir pointed out that the Koran regards nursing as an admirable and good profession, and he suggested that cleric and media support would help to change attitudes.

Several doctors emphasized the importance of improving the quality of nursing through education and retraining. Dr. Sarhad concentrated on the need to upgrade the nurses’ skills, qualifications, standards and confidence. Dr. Batool wrote that improving the quality of nursing in Iraq will do the job.

The physicians also worried about the size of current nursing work force, and its ability of meet the needs of the health care system. They were particularly concerned about the pool of military nurses which could help in meeting the current needs; however, they thought that the military nurses should be retrained to meet quality of care standards and to deal with civilian populations. They discussed the issue of importing foreign nurses to fill the current Iraqi needs. Dr. Ameir thought that it would be important to carefully screen any foreign nurses before bringing them to work in Iraq.

Finally, several physicians supported the nurses' desire to have a post with decision making power in the Ministry. Dr. Naira thought that the nurses should have a DG status. She added that if the nurses at the MOH are not given status here, nothing will change anywhere. She pointed out that the reorganization of the MOH strips them of what little power they now hold. Dr. Ameir reported that Dr. Abbas supports nursing. Dr. Ameir thought that the nurses needed a voice in the decision-making at the MOH. He pointed out that the MOH is the largest Ministry in Iraq, and employs 100,000 people. He thought that nurses deserved equity in the health care system.

Dr. Sarmad finished his comments, "With our resources and a real will, I think that we can help this dream for nursing come true".



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Participants invited to the session:

Dr. Neima Said Abid	MOH, Director General of Preventive Medicine Directorate
Dr. Naira Al-Awqati	MOH, Director of Maternal Child Health Section
Dr. Fatin Abdullah	MOH, National Manager for MCH
Dr. Sarmad Suleiman	MOH, Director of Primary Health Care Department
Dr. Rafa Jafar	MOH, Director of Planning Department
Dr. Naugham Muhsin	MOH, Director of Vital Statistics
Dr. Shaker	MOH, Director General of Technical Directorate
Dr. Batool	MOH, Director of Training Programs
Dr. Ameir Al Mukhtar	Medical City, Director General
Dr. Saieb Algailani	Medical City, former Director General
Dr. Nada Alward	WHO, Medical Officer and Baghdad University, Assistant Professor of Community Medicine
Farida Sadik	MOH, National Manager for Nursing

Comments from physicians who attended the session.

Dr Rafa wants something done for nurses.

1. Many meetings are held with no action, no achievements.
2. Fix the strategic plan with an action
3. The constraints start with changing the image of nurses.
4. PHC only has paramedics and medical assistants. No nurses on PHC team. Nurses need support. They are considered part of the team.
5. Nurses must take charge to change things.

Dr Naira supports the plan to develop nursing.

1. The strategic plan has captured every aspect.
2. MOH should combine this plan with the latest WHO revision of its plan from two weeks ago. It is very good overall. WHO is very supportive of the nursing
3. The plan has too many committees. The tasks should be consolidated under four committees or less.
4. She believes nurses should have DG status. The proposed re-organization of the MOH reduces even the little power that the nurses have. Regarding the current situation, she wants something done at MOH level. We need more than talk. If nurses at MOH are not given some status here, nothing will change anywhere.
5. The role of nursing is not clear with the doctors. We must incorporate doctors into the process of development of nursing. She does not agree with doctors not respecting nurses.

6. Military nurses are more of a burden than a help. They must be rehabilitated and retrained more than any other group of nurses. They must be trained to work with civilian staff and patients.
7. She suggested sending some Iraqi nurses to Jordan or other surrounding countries to develop good trainers.
8. Dr Abbas should issue guidance and policy to have a status for nurses that is not “sub-staff,” with a separate department.

Dr Ameir reports that Dr Abbas is supportive of nursing.

1. Dr Ameir thinks that Medical City needs to have a chief nurse position. He would like to establish a nursing directorate if he can get funding.
2. Nurses are designated as “sub-staff” at Medical City. Dr. Ameir is changing all the medical badges at Medical City to eliminate the designation “sub-staff.” This is substantial work for him, as he must sign all the new badges.
3. Nursing status must change to recruit good people. The image must change at all levels. Respect is needed immediately to recruit good candidates for nursing. We want nurses who have confidence in their role, care about their careers and themselves. The nurses need support from higher levels.
4. Families and general public have bad opinion of profession.
5. We may require cleric support to change attitudes. The Koran says that nursing is an admirable and good profession.
6. We may need media support to change attitudes.
7. Working with other women’s reform groups might help to change the image.
8. We must inject motivation into nursing. Salaries have increased many times. The nurses should be willing to take more responsibility. We need a large number of well trained nurses.
9. He is concerned about closing the high school nursing program, and how that will affected the size of the nursing pool.
10. Dr. Ameir suggested hiring foreign nurses to work in Iraq to fill the need. He has worked in Britain and Abu Dabi. He reported that some Philippine and Indian nurses are wonderful, and some are not. It would be important to carefully screen any foreign nurses before bringing them to work in Iraq.
11. Need to develop nursing standards and job descriptions.
12. Need to develop retraining programs and continuing education for professional development. WHO will assist with curriculum revision, educators for colleges, and training programs.
13. Work with financial DG to get funds for nursing. We can’t appoint new nurses to the hospital staff due to the hiring freeze. We can’t hire the best qualified staff, so we make do with the old staff.
14. The nurses must have a voice in decision-making at the MOH. There are 100,000 employees in the health system, and the MOH is the largest Ministry in Iraq. There must be equity for the nurses.

Written comments from physicians who were unable to attend the session.

Dr. Naima Said wrote about the nursing plan:

1. There are too many committees. However, there is no clear mechanism to coordinate the action of these committees. I propose to establish one steering committee which would include all the stakeholders (MOH, MOHE, CPA, WHO, INA, NGOs, ISS, community representatives, MOC... etc). Subcommittees or working groups would deal with each specific objective.
2. The Iraqi Society of Sociologists (ISS) and Al Hawza should be actively involved in planning to improve the image of the Iraqi nurse because I believe that it is a social problem more than anything else.
3. There should be laws and regulations which ensure a safe working environment, and Prevent abuse and violence against women.
4. Establish living accommodations for nurses especially in rural areas.
5. Specialty nursing mentioned in the capacity of nursing education should include psychiatric nursing and school nursing.
6. There is no time line for implementing the action plan.

Dr. Batool suggests:

1. Improving the quality of nursing in Iraq will do the job. Otherwise, giving authority to the nurses at the same time will be of no use.
2. Establish a committee to monitor nursing and midwifery, and control the bad practices with punishment.
3. I do believe that if you want to destroy something, do it with several committees!

Dr. Sarmad Suleiman wrote:

It is my pleasure to look for a dream (vision) of nurses in this report. I hope that we will work hard to let their dream come true.

My objective is to:

1. Upgrade the nurses' skills, qualifications, standards, confidence
2. Try to involve the nurses in the health process (planning, implementation, monitoring and evaluation) and not to remain as an implementer (tool) only
3. In Syria, the nurse is the dynamo of the health facility. In the PHCC that I visited, the nurse is responsible for IMCI, well trained, well skilled, well promoted to conduct the responsibilities and well supported from the health system and from the community. She knows about the IMCI strategy, the statistics, the classification, growth monitoring, health education regarding the childhood illnesses, vaccination, nutrition and breast feeding counselling, etc. The doctor only assesses the child, classifies the illness and prescribes the drugs. The nurse is responsible for the records, instruction on the drugs, when to call back and all other things. She was doing her job with her job with a high level of confidence, skills and interest.
4. With our resources and a real will, I think that we can help this dream for nursing come true.